

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10/659735

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
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47		/				
48		/				
49		/				
50		/				
TOTAL IND.	4					
TOTAL DEP.	46					
TOTAL CLAIMS	50					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		/				
52		/				
53		/				
54		/				
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	3					
TOTAL DEP.	33					
TOTAL CLAIMS	36					